

2013

IHCDA Claim Submission Manual



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Section 1: Introduction

1.1 Purpose of Manual

This manual is a reference guide for grantees and partners of IHCD who submit claims for reimbursement which are reviewed through the Financial Operations Department. It is designed to answer questions regarding procedures, rules, and required documentation for each applicable program and claim type. This manual should be a useful resource for partners and grantees and should be referenced regularly. ***Please note that the Cost Allocation Plan section of the manual applies to any and all grantees of IHCD.***

This manual is to be used only as a supplement to regulations and program guidance and should not be considered a complete guide. Questions regarding compliance with regulations and policies outside the scope of claim submission should be addressed to program staff at IHCD. The responsibility for compliance with federal program regulations lies with the recipient.

1.2 Disclaimer

The publication of this manual is for convenience only. Your use or reliance upon any of the provisions or forms contained herein does not, expressly or impliedly, directly or indirectly, suggest, represent, or warrant that your development will be in compliance with the requirements of any applicable federal, state or IHCD regulations, policies and guidance outside the scope of the Claims Submission process. IHCD and contributing authors hereby disclaim any and all responsibility of liability, which may be asserted or claimed arising from reliance upon the procedures and information or utilization of the forms in this manual.

Because of the complexity of federal and state regulations and the necessity to consider their applicability to specific circumstances, recipients are strongly encouraged to seek competent, professional legal and accounting advice regarding compliance issues. IHCD's obligation to monitor for compliance with the requirements of these federal regulations does not make IHCD or its subcontractors liable for a recipient's noncompliance.

1.3 Purpose of Claims Processing and Related Software

The purpose of claims processing and related software is to ensure that requests for reimbursement made to IHCD through the Financial Operations Department are eligible and contains the documentation necessary to validate the claimed expenses. The various software systems utilized by IHCD do not and are not meant to serve as the official accounting system of our partners. It does not track or contain information on all expenses incurred for a program. It tracks all expenses for which IHCD receives requests for reimbursement against a specific award, the funds returned to IHCD for various reasons and the impact of those funds on the overall budget on individual awards and federal allocation.

1.4 Submission and Authority to Bind

IHCD utilizes an Authorized Signature Form to determine which individuals at an organization have the authority to bind the organization under a number of circumstances. The Authorized Signature Form is distributed at the time award documents are released and upon request.

Please note that any and all individuals on the Authorized Signature Form, which must be notarized, are authorized to legally bind the organization and that the organization will be liable for any and all issues that arise. Circumstances in which an Authorized Signor may bind the organization include, but are not limited to:

- Contracts;
- Memorandums of Understanding;
- Amendments;
- Budget Modifications; or
- Claims Submission.

It is the responsibility of the organization to notify IHCD A in writing in the event that an individual no longer has the authority to bind the organization. Until such a time that notification is received by IHCD A, the organization will continue to be bound to all commitments made by the individual and liable for any and all issues that arise.

1.5 Applicable Programs

This manual is applicable to all programs for which claims/reimbursement requests are reviewed through Financial Operations. This includes all programs which utilize IHCD AOnline for claim submission with the following noted exceptions:

- Hardest Hit Fund (“HHF”);
- Indiana Foreclosure Prevention Network (“IFPN”);
- Individual Development Account Program (“IDA”); or
- Tax Credit Assistance Program (“TCAP”).

1.6 Basic Policies

IHCD A will only process requests for reimbursement of eligible expenses which have been incurred in accordance with all the following:

- Federal requirements;
- State statutes;
- IHCD A & Program Policies; and
- Award Agreements.

Requests for reimbursement may be made only in accordance with the budget described in the award agreement and any subsequent modifications which have been approved by IHCD A. Additionally, any program guidance/regulations on cost eligibility will be used when reviewing expenses for reimbursement.

In order to ensure timely submission of expenses and timely disbursement of funds, Grantees that submit expenses more than three months old will not be reimbursed without additional

review and approval by the individual at IHCD A overseeing the claims review process. We encourage Grantees to submit on at least a monthly basis to prevent loss of reimbursement.¹

IHCDA reserves the right to request additional documentation beyond those standards defined within this document as part of our random review and quality assurance process. Failure or refusal to submit requested documentation may result in a reimbursement reduction in part or in full as well as additional action as deemed fit by IHCD A.

¹ Please note that certain programs require the incursion of costs as part of the application process. In the event that a program allows costs to be incurred prior to the award date and submitted for reimbursement, the Grantee will have three (3) months from the effective date of the grant agreement to submit those costs for review.

Section 2: Claim Types

In order to allow for an effective system of allocating and tracking various federal program expenditures, IHCDA has developed a series of claim types. Depending upon the nature of the transaction, a recipient should select the claim type that best fits their specific circumstances. In the event that an organization is unsure which claim type is appropriate, please contact IHCDA's Financial Operations Department for clarification before submitting.

Please note this section only defines each claim type. Section 3 outlines the submission requirements for each claim type within each program. Section 4 provides a guide on submitting claims.

2.1 Grantee Payment

A grantee payment is a standard draw of funds by the grantee for their award. This transaction will initiate a payment to the award grantee through the claims process. This is the most common type of transaction.

2.2 Third Party Payment

A third party payment is a draw of funds entered by an award grantee that will be paid to another organization that is specified in the transaction. The third party organization must be a partner of the award grantee in the Authority DMS system.

Example: John Smith is a participant in IHCDA's Energy Assistance Program ("EAP") and is eligible for \$600 in utility benefit. John's utility company, Power-R-Us, participates in the EAP program and coordinates through IHCDA's Grantee, HelpIndiana Inc., to provide the benefit. Power-R-Us submits information to HelpIndiana Inc. who has a grant agreement with IHCDA. HelpIndiana Inc. submits a Third Party Payment request to IHCDA. Once reviewed, IHCDA remits the \$600 directly to Power-R-Us to complete the transaction.

2.3 Adjustment

An adjustment transaction allows an award grantee to make corrections to line items within an award. An adjustment will have both positive and negative line item amounts and must have a net total of zero. No funds are either drawn or paid as part of an adjustment transaction.

2.4 Return of Funds (Grantee and Third Party)

A grantee return of funds transaction is one in which the Grantee returns funds to the State, and the funds return to the State's program budget not the individual award budget.

A third party return of funds transaction returns funds to the State that were initially paid to a third party on behalf of the grantee. In the event of a third party return of funds, the funds are not returned to the organization's award budget but to the State's overall budget.

An organization may have a return of funds (grantee or third party) claim in conjunction with an award that is already closed if the finding is included in the organization's A-133 report. In this case contact IHCDA for additional information on how to submit this return of funds claim.

Please note that all checks issued in conjunction with a return of funds claim should match in dollar value the amount claimed on the return of funds claim and as supported by the necessary supporting documentation. Checks should not be netted against future expenses or expenses that an organization plans to claim on a subsequent claim.

Example: An organization submits a return of funds claim for \$5,000 and has \$2,000 of expenses they would like to claim for reimbursement under admin.

Incorrect: Submit a return of funds claim for \$5,000. Submit a grantee payment claim of \$2,000. The organization then writes a check for \$3,000 and does not expect reimbursement for the \$2,000 grantee payment.

Correct: Submit a return of funds claim for \$5,000. Submit a check for \$5,000 in conjunction with the return of funds claim. Submit a separate grantee payment for \$2,000 and receive payment for the \$2,000 of expenses incurred and requested for reimbursement.

2.5 Repayment (Grantee and Third Party)

A grantee repayment transaction consists of a grantee repaying funds to the State in which the funds are placed back into the grantee's award budget for reuse.

A third party repayment transaction consists of funds being repaid to the State which were initially paid to a third party on behalf of the grantee. In the event of a third party repayment, the funds are placed back in the grantee's award budget for reuse.

Please note that all checks issued in conjunction with a repayment claim should match in dollar value the amount claimed on the repayment claim and as supported by the necessary supporting documentation. Checks should not be netted against future expenses or expenses that an organization plans to claim on a subsequent claim.

Example: An organization submits a Repayment claim for \$10,000 and has \$6,000 of expenses they would like to claim for reimbursement under admin.

Incorrect: Submit a repayment claim for \$10,000. Submit a grantee payment claim of \$6,000. The organization then writes a check for \$4,000 and does not expect reimbursement for \$4,000 of the grantee payment claim.

Correct: Submit a repayment claim for \$10,000. Submit a check for \$10,000 in conjunction with the repayment claim. Submit a separate grantee payment for \$6,000 and receive payment for the \$6,000 of expenses incurred and requested for reimbursement.

2.6 Program Income

A program income transaction is for the award grantee to report and submit program income for their award. Depending on the rules for the particular award, a program income transaction may require the payment of the funds to the State.

Section 3: Submission Requirements

IHCDA is committed to ensuring Grantees receive funds in a timely manner. By adhering to the documentation requirements outlined below and by working together, IHCDA and Grantees can ensure timely disbursement of funds.

3.1 Prior to Drawing Funds

The initial draw will not be released until IHCDA staff has confirmed that the project has submitted all necessary execution documents, that those documents have been reviewed and approved and any program specific information required prior to funds disbursement have been received. The Grantee must provide the following documentation for each grant prior to drawing any funds:

1. Authorized Signature Form;
2. Automated Clearinghouse (ACH) Banking information submitted through IHCDA Online (unless other arrangements are made with IHCDA);
3. Request for Taxpayer Identification Number and Certification (W-9);
4. All Executed Documents required for the specific program seeking funding (refer to program manuals for additional information); and
5. All grantees are required to submit a cost allocation plan that has either been approved by the federal cognizant agency or for approval by IHCDA. The Cost allocation plan should include a detailed listing of what the organization considers a fringe benefit.

IHCDA will send the necessary forms above to the Grantee along with their funding agreement(s). Grantees are required to return all documents to IHCDA promptly and before initiating a claim for reimbursement.

3.2 Documentation

Because each of the various programs IHCDA administers has distinct federal regulations, program objectives and reporting requirements, complete standardization of documentation requirements is not feasible. IHCDA has made efforts to standardize documentation where possible by evaluating our documentation requirements after reviewing numerous resources including: federal regulations, federally issued guidance and notices, State laws and regulations and the results of the May 2013 claims survey issued to current Grantees. The results of those efforts are contained in this document.

3.2.1 Cost Allocation Plan

The Grantee is required to have an approved cost allocation plan, including a detailed listing of items classed as “fringe benefits” and an indirect cost rate policy, on file with IHCDA. If approved by a federal agency, the cost allocation plan must still be submitted to IHCDA for review and record retention. Items not included in the cost allocation plan will not be reimbursable to the Grantee until such a time as a revised cost allocation plan is submitted and approved by either a federal agency or by IHCDA. IHCDA reserves the right to request the most updated version of the cost allocation plan at any time during the year for additional review and consideration and to take additional action fiscally and programmatically if issues or discrepancies exist.

Costs associated with administrative and indirect costs should be shown in the support documentation summary in the form of general ledger, accounting reports or other accounting software generated reports. The determination of administrative expenses, indirect costs and direct costs are determined by federal regulations on cost reimbursement and regulations and guidance for each specific program.

IHCDA strongly recommends that a Grantee review the cost allocation plan annually to ensure appropriate cost allocation. IHCDA strongly encourages Grantees to communicate regularly with IHCDA on changes to cost allocation plans as reviews during the claims process, monitoring or other similar visits may result in pay backs as the result of an inappropriate cost allocation plan.

Initial Submission

Cost Allocation plans should be submitted to A133@ihcda.in.gov no later than March 31, 2014 for the initial review. Once reviewed, the Grantee will receive notice of approval, denial or the need for clarification.

Changes to Cost Allocation Plan

In the event that a Grantee changes its Cost Allocation Plan, those changes must be submitted to IHCDA via A133@ihcda.in.gov no later than thirty (30) days after the changes are made. Those changes are subject to review and approval by IHCDA.

Annual Certification

Annually, no later than January 1st or the first business day of the calendar year, IHCDA will permit a Grantee to submit the Cost Allocation Plan Certification provided in Appendix D of this document in the event that **all** the following criteria are met:

- The Cost Allocation Plan has not changed since its original submission or since IHCDA's approval of the latest amendments/changes to the plan; and
- It has been less than three years since the original submission of the plan and/or the latest amendment/change to the plan on file with IHCDA.

Claims and the Cost Allocation Plan

While IHCDA may not require all reimbursement requests to be held while Cost Allocation Plans and/or requested changes/amendments are being reviewed, IHCDA does reserve the right to review reimbursements made during the Plan review period for eligibility in the event that the Plan and/or the changes are denied.

Additionally, IHCDA reserves the right to withhold reimbursements in the event that a Grantee fails to submit the Annual Certification, Cost Allocation Plan or change requests for review by the established deadlines.

3.2.2 General Documentation

Every claim that is processed through IHCDA Online is required to have certain supporting documentation included with the request for reimbursement. Those items include:

1. **Signed Claim Receipt Pages** (generated in IHCDA Online) – This must be signed by an Authorized Signor. Claims containing signatures that do not match the Authorized Signature Form on file or claims that contain no signature will not be accepted. The

- Claim Receipt must be signed, but a PDF of the signed claim receipt is acceptable for submission. The noted exception is Third party payments for EAP, State EAP and Leveraging EAP which do not require signed claim receipt pages;
2. **Claim Summary Form** (generated in IHCD Online) – Breakdown of expense reimbursement requested by line item and, in certain instances, narrative questions which must be completed;
 3. **General Ledger, Trial Balances or Other Accounting Software Generated Reports** (unless otherwise noted) – Reports supporting costs incurred should be submitted. Reports should be generated in such a way as to include the following:
 - a. Only those costs incurred by that program during the specific date range for which reimbursement is being requested (ex. May 1-May 15);
 - b. Indirect costs that are allocated across all activities should have separate accounts for each program. A single lump sum record with a note that a specific amount is being charged to a certain program is not acceptable. If requested, documentation supporting the cost allocation or salary/wage determination should be readily available;
 - c. Detailed information of expenses including vendor name, date paid, date of transaction and description of the actual expense. Incomplete, missing or insufficient descriptions may result in IHCD asking for additional documentation to support those costs²; and
 - d. In the event of payroll costs, IHCD should be able to easily distinguish the individuals included in the expense, the timeframe covered in the expense and the details that make up the expense.
 4. **Copies of Invoices/Receipts** – Equal to or in excess of the program specified threshold (see program specific documentation in Section 3.23. Invoices/Receipts that do not exceed that threshold need not be submitted unless selected for further review as part of our random quality assurance process. All invoices and receipts must be maintained and filed by the Grantee in accordance with award agreements and federal regulations and be available for review upon request.

Any Grantee who is on a Quality Improvement Plan (“QIP”) may be required to submit all invoices or additional documentation associated with that program or all programs for review as part of the QIP.

3.2.3 Program Specific Documentation

While efforts have been made to standardize requirements across programs of similar activities and purposes, complete standardization is not feasible. For documentation requirements specific to each program covered under this guidance, please refer to program sections below.

² Please note that certain programs, due to the nature of the activities, allow for invoices/payables to be submitted prior to settlement of the payable. In these instances, the detailed information included in the general ledger report will include information on the payable rather than a recognized expense. Please refer to program guidance on the programs and expenses that are eligible under this format.

Community Development Block Grant (CDBG), Neighborhood Stabilization Program (NSP), Community Development Block Grant-Disaster (CDBG-D) and HOME Investment Partnership Program (HOME)

CDBG, CDBG-D, HOME, and NSP claims must include the following information in addition to general requirements outlined in Section 3.22:

1. One page summary of expenses sorted by address;
2. All invoices/receipts relating to construction and rehabilitation work sorted by address; and
3. All administrative invoices/receipts.

IHCDA will withhold the final \$5,000 of an award until such a time as all identified monitoring issues have been resolved. Additionally, IHCDA will withhold the final 10% of rehabilitation funds from any project address until a lead clearance report is submitted and approved.

Shelter Plus Care Legacy Projects (S+C)

Due to the nature of S+C, its eligible cost structure, and regulations, general ledger reports will not be required. The remaining general documentation requirements remain in effect. In addition to those requirements, Grantees must to submit:

1. LOCCS Draw Request Form;
2. Housing/Rental Assistance Reimbursement Form³; and
3. Monthly CSBG Reimbursement Claim⁴.

Permanent Supportive Housing for Persons with Disabilities (PSHPD)

PSHPD claims must include the following information in addition to general requirements outlined in Section 3.22:

1. LOCCS Draw Request Form;
2. Housing/Rental Assistance Reimbursement Form;
3. Monthly CSBG Reimbursement Claim⁴; and
4. Administrative Invoices/receipts where the amount charged to the program equals or exceed \$200.

Emergency Solutions Grant (ESG)

ESG claims must include the following information in addition to general requirements outlined in Section 3.22:

1. Administrative Invoices/receipts
2. Rental Assistance and Financial Services Reimbursement Form-If Applicable
3. HMIS Case Management Summary-Rapid Rehousing and Homeless Prevention only

³ For the Shelter Plus Care program, this form includes the Cost Savings Element of the program and captures the necessary information to review and validate this budget item.

⁴ Currently the CSBG program provides a monthly fee per participant in a program to help offset costs within this program. For federal funding tracking purposes the request for these funds must be submitted separately in IHCDAOnline. The Claim Receipt and Claim Summary pages are all that must be submitted with this claim as it is partnered with the rental assistance claim.

Housing Opportunities for Persons with AIDS (HOPWA)

HOPWA claims must include the following information in addition to general requirements outlined in Section 3.22:

1. Housing/Rental Assistance Reimbursement Form; and
2. Administrative invoices/receipts where the amount charged to the award equals or exceed \$200.

HOME Funded Tenant Based Rental Assistance (HOME TBRA)

HOME TBRA claims must include the following information in addition to general requirements outlined in Section 3.22:

1. HOME TBRA Rental Assistance spreadsheet; and
2. Administrative invoices/receipts where amount charged to award equals or exceed \$200.

Weatherization (WX), State Funded Weatherization (WS,) and LIHEAP Weatherization (LIHEAP WX)

WX, WS, and LIHEAP WX claims must include the following information in addition to general requirements outlined in Section 3.22:

1. One page summary of completions claimed, name and address, date of interim/final audit inspection, and the total dollar value of that address's weatherization work; and
2. Copies of invoices/receipts where amount charged to award equals or exceeds \$1,000.

Community Services Block Grant (CSBG)

CSBG claims must include the following information in addition to general requirements outlined in Section 3.22:

1. Copies of invoices/receipts where amount charged to award equals or exceeds \$1,000.

Hoosier Energy

Hoosier Energy claims must include the following information in addition to general requirements outlined in Section 3.22:

1. Copies of invoices/receipts for all wood stoves replaced; and
2. Copies of other invoices/receipts where amount charged to award equals or exceeds \$1,000.

EAP, State Funded EAP and Leveraging EAP

EAP, State Funded EAP, and Leveraging EAP claims must include the following information in addition to general requirements outlined in Section 3.22:

1. Copies of invoices/receipts for all air conditioners during summer cool;
2. Copies of all administrative invoices/receipts where the amount charged to the award equals or exceeds \$1000; and
3. Transmittals for all 3rd party claims.⁵

⁵ Third Party Vendors and Grantees who choose to receive checks may be paid on a bi-weekly basis depending upon the frequency of reimbursement request submission.

REACH

REACH claims must include the following information in addition to general requirements outlined in Section 3.22:

1. Invoices/Receipts for homeowner repairs and preventative maintenance; and
2. Copies of all administrative invoices/receipts where the amount charged to the award equals or exceeds \$1,000.

Development Fund

Any Development Fund awards made in conjunction with another program listed in this guidance are subject to all general documentation requirements as well as those program specific requirements of the paired program.

Section 4: Claim Submission

4.1 Access in IHCDOnline

For step by step information on how to submit a claim, please refer to IHCDOnline's resource webpage at: <https://ihcdaonline.com/AuthorityOnline/Links.htm>. Once there select "Registering a Username and Password."

It is the responsibility of the grantee to notify IHCD when an individual's access to IHCDOnline should be revoked. Until such a time, the individual will continue to have the approved access, and the organization will be responsible for any issues that arise.

4.2 Submitting a Claim in IHCDOnline

For information on how to submit a claim, please refer to "Claims Management Users Guide" available at: <https://ihcdaonline.com/AuthorityOnline/Links.htm>

4.3 Resubmitting a Claim

In the event that IHCD has denied a claim, the organization must resubmit the claim to IHCD for review if reimbursement is still desired after all necessary changes/corrections are made. Below are instructions on resubmitting a claim to IHCD.

- 1.) The agency's designated user will go online to <https://ihcdaonline.com> and login. If the person is a new user, the user will need to register as explained in *Section 4.1*.
- 2.) Once the username and password are verified, the user will click on Awards Claims Management. A summary of all claims submitted to IHCD will appear.
- 3.) The user will select the claim that was previously denied.⁶
- 4.) The user should complete each tab that is viewable. Please refer the "Claim Management Users Guide" at <https://ihcdaonline.com/AuthorityOnline/Links.htm> for more information.
- 5.) Once all tabs have been viewed and completed, the user will hit the "Submit Claim" button. The agency will receive a Claim Receipt, which should be printed. The Claim Receipt should then be signed by an Authorized Signor.
- 6.) If the claim submitted is for a program that supports electronic upload, the user will click on Supporting Documentation button to begin the upload process. When prompted, select the file to upload. Please see Section 3 for more information on necessary documentation submission (this will include a signed copy of the Claim Receipt printed in Step 7).
- 7.) Once these steps are completed, the claim will be remitted to IHCD for approval. The claim will be reviewed for accuracy. If there are any issues, IHCD's Claims staff will notify the agency. The claim will be approved for payment once the questions and issues are corrected to the satisfaction of IHCD.

⁶ You should not create a new claim when resubmitting a previously denied claim.

4.4 Submitting a Check to IHCD

In the event that an organization must submit a check to IHCD in connection to a claim processed through IHCDOnline and Financial Operations, the organization should follow the process as outlined below.

1. Submit a claim via IHCDOnline or other system as described in Section 4. This includes submitting all necessary supporting documentation through IHCDOnline or other means as appropriate.
2. Submit a check to IHCD with a remittance which contains the following information:
 - Award Number;
 - Program; and
 - Reason for check (i.e. Monitoring Finding 3 for Award XXX for Participant X)

Checks should be submitted to the following address:

IHCD
Attention: Receivables
30 South Meridian Street, Suite 1000
Indianapolis, Indiana 46204

Section 5: Viewing the Status of a Claim

For information on viewing the status of your claim, please refer to the “Checking the Status of a Claim” tutorial on <https://ihcdaonline.com/AuthorityOnline/Links.htm>.

Section 6: Notice of Payment

Once IHCD has reviewed and approved the claim/reimbursement request, the funds will be disbursed and notification will be issued to the user who submitted the claim in IHCDOnline as well as any individual identified as a claim contact for the organization.

IHCD sends these notices as a courtesy. They do not constitute an official notice. Any organizations under obligation to disburse funds within a specified period of time of receiving them in accordance with program regulations are still required to monitor daily account balances to ensure compliance.

Section 7: Claim Denial

7.1 Unallowable Expense

If, during the course of the claim review, it is determined that an expense for which reimbursement is being requested is not an allowable expense as defined by the applicable regulations, guidance, policies and procedures of that specific program and IHCD, IHCD reserves the right to deny the claim. In the event that the unallowable expense is part of a larger claim, IHCD will deny the entire claim, inform the agency of the reason for the denial and instruct the agency to resubmit the claim with the unallowable expense removed from the claim or adjusted as necessary.

7.2 Insufficient Documentation

In the event that an organization is unable to provide sufficient documentation to IHCD to justify what might be considered an allowable expense with proper documentation, IHCD reserves the right to deny the claim in part or in full. In the event that the expense item with insufficient documentation is part of a larger claim, IHCD will deny the entire claim, inform the agency of the reason for the denial and instruct the agency to resubmit the claim with the insufficiently documented item removed from the claim or adjusted as necessary.

7.3 Other Denials

IHCD reserves the right to deny claims and requests for reimbursements for reasons over and above those mentioned in previous sections. These can include, but are not limited to, insufficient award budget, unexpected reduction in federal funding, failure to submit claims in the timeframe proscribed by the program, and failure to comply with program guidance in other material respects (monitoring, program administration, audit requirements, etc.).

7.4 Appeals Process

If an organization believes that a claim has been improperly denied or that the claims review process as defined in this document was not followed, the organization should contact claimappeal@ihcd.in.gov and request a secondary review. The request for review should include the following:

- Agency name
- Award number
- Claim Receipt #
- Reason provided for denial
- Justification for reconsideration and any additional documentation for consideration.